

221102

## STATE OF SOUTH CAROLINA

## (Caption of Case)

Example: Application for a Class C Charter Certificate from  
John Doe dba Doe's Limo

Request to cancel Class C Charter Certificate

Senior Services Inc. of Chester County

BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

## TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2008 - 97 - T

RECEIVED

JAN 11 2010

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: \* Michael Klessinger  
SENIOR SERVICES INC. OF CHESTER COUNTY  
Address: \* PO Box 1109

Telephone: \* 803-385-3838

Fax: \* 803-385-3810

Chester SC

Other:

29706

Email: \* ssicc@truvistg.net

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

## NATURE OF ACTION (Check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Application - Class A/A Restricted   | <input type="checkbox"/> Request for Name Change on Certificate        |
| <input type="checkbox"/> Application - Class C Taxi   | <input type="checkbox"/> Request to Amend Scope of Authority           |
| <input type="checkbox"/> Application - Class C Charter  | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc.) |
| <input type="checkbox"/> Application - Class C Charter Bus  | <input type="checkbox"/> Request to Amend Passenger Limit              |
| <input type="checkbox"/> Application - Class C Non-Emergency  | <input type="checkbox"/> Request                                       |
| <input type="checkbox"/> Application - Class C Stretcher Van  | <input type="checkbox"/> Exhibit                                       |
| <input type="checkbox"/> Application - Class E Household Goods  | <input type="checkbox"/> Late-Filed Exhibit                            |
| <input type="checkbox"/> Application - Class E Hazardous Waste  | <input type="checkbox"/> Letter  |
| <input type="checkbox"/> Application  | <input type="checkbox"/> Proposed Order                                |
| <input type="checkbox"/> Request for Extension to Comply with Order   | <input type="checkbox"/> Publisher's Affidavit                         |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded | <input type="checkbox"/> Reservation Letter                            |
| <input checked="" type="checkbox"/> Request for Cancellation of Certificate   | <input type="checkbox"/> Response                                      |
| <input type="checkbox"/> Request for Suspension   | <input type="checkbox"/> Return to Petition                            |
| <input type="checkbox"/> Request for Reinstatement  | <input type="checkbox"/> Other: _____                                  |

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

Print Form

Reset Form

## Request for Cancellation of Certificate

## File the original with:

Public Service Commission of South Carolina  
 Docketing Department  
 Motor Carrier Matters  
 P.O. Box 11649  
 Columbia, S.C. 29211  
 (803) 896-5100  
 FAX (803) 896-5199

## Mail or fax a copy to:

S.C. Office of Regulatory Staff  
 Transportation Department  
 1401 Main Street, Suite 900  
 Columbia, S.C. 29201  
 (803) 737-0578  
 FAX (803) 737-0815

RECEIVED

JAN 11 2010

ORS  
T.T.W.W.WDATE: 1-11-10

Please consider this a request to cancel my:

- ☐ Class C Taxi Certificate ☐ Class A Restricted Certificate
- ☒ Class C Charter Certificate
- ☐ Class C Charter Bus Certificate
- ☐ Non-Emergency Certificate
- ☐ Class E Household Goods Certificate
- ☐ Class E Hazardous Wastes Certificate

My Certificate Number is 17966

Senior Services, Inc. of Chester County DBA N/A  
 (Name of Company) (If applicable)

\* 1197 Armorey Rd  
 (Street Address)

\* Po Box 1109  
 (Mailing Address, if different from Street Address)

\* Chester SC 29706  
 (City, State, Zip Code)

\* Chester SC 29706  
 (City, State, Zip Code)

\* 803 385-3838  
 (Telephone Number)

\* [Signature]  
 (Signature)

\* Executive Director  
 (Title)